

GAU

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In re application of:

Eric Rose, et al.

FEB 2 5 1999

Serial No.: 09/053,872

Group Art Unit: 1642 Group 3700

Filed: April 1, 1998

For:

A METHOD FOR INHIBITING THROMBOSIS IN A PATIENT

WHOSE ELOOD IS SUBJECTED TO EXTRACORPOREAL CIRCULATION

FEB 1 6 1999

GROUP 18

HONORABLE ASSISTANT COMMISSIONER FOR PATENTS Washington, D.C. 20231

February 4, 1999

FEE

SIR:

Transmitted herewith is an amendment to the above-identified application.

| X | Small entity status of this application under |
|---|---|
| | 37 C.F.R. § 1.9 and § 1.27 has been established by a verified statement previously submitted. |
| | |

FEB 22 1999

a verified statement to establish small entity status under 37 C.F.R. § 1.9 and § 1.27 is enclosed.

TECHNOLOGY CENTER 3700

X No additional fee is required.

The filing fee is calculated as follows:

| | NUMBER AFTER AMEND- MENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | | | NUMBER OF EXTRA CLAIMS PRESENTED | | 1 | RI SMALL ENTITY | OTHER ENTITY | | SMALL ENTITY | OTHER ENTITY | |
|---|-----------------------------------|---|----|----|---|-----|-----|-----------------------|-----------------|----|-----------------|-----------------|---|
| Total Claims | 36 | - | * | 38 | = | *** | 0 | x | 9 | 18 | = | О | |
| Indepen- dent Claims | 7 | - | ** | 8 | = | *** | 0 | x | 39 | 78 | = | 0 | · |
| Multiple Dependent Claims(s) Presented Yes X No For First Time: | | | | | | | 130 | 260 | | 0 | | | |

*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

**If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

***If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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Amendment Transmittal Letter Page 2

| AMENI | pendent) is the highest of the "NUMBER AFTER DMENT" in any prior amendment or the number laims as originally filed. |
|----------|--|
| | Please charge Deposit Account Noin the amount of \$ |
| | A check in the amount of \$ is enclosed. |
| <u>x</u> | The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125 . Three copies of this sheet are enclosed. |
| | Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims. |
| | X Any patent application processing fees under 37 C.F.R. §1.17. |

The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or

Respectfully submitted,

I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents

Washington, D.C. 20231.

28,678

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